REMARKS

The Applicant wishes to thank the Examiner for her time in discussing the present application on February 27, 2007. This discussion focused on issues related to clarity in claim language and did not directly address issues of allowability of the claims.

In light of these discussions and the Office Action of January 8, 2007, the claims have been amended as described below.

Background

The present invention provides a set of workspaces in which medical record software applications may be opened. Within a given workspace, the software applications become "patient-record context sensitive" so that after a user opens a first application to look at a patient's records, subsequent applications opened by the user are automatically directed to the records of the same patient. The software applications opened by the user are nevertheless independent, they can be opened and closed in any order, and if one application is opened at a time when no other application is open in the workspace, a new patient may be identified through a dialog box. Further, records required by a particular application are identified only after the application is opened; making it practical to have many applications without invoking multiple, unneeded database searches.

Claim Rejections 35 U.S.C. §103

Claims 97-117 have been rejected under 35 U.S.C. §103(a) as being unpatentable over Sun in view of Garland.

Claims 97 and 108:

These claims have been amended along the lines discussed with the Examiner to indicate that new "applications" opened by a user, initialize to the same patient whose records are being reviewed by previously opened applications, but if there are no previously opened applications, a dialog box opens to allow entry of patient information by the user. Further, the claims have been amended to indicate that this process of identifying patient records occurs only when a new application is identified by the user, and that the applications are independent and may be opened, or not, in any order.

As noted by the Examiner, Sun does not teach "patient-record context sensitivity", that is, a system that reviews opened applications to determine a current patient whose records are being

accessed and then initializes new applications to also access records related to that current patient.

Garland is cited as teaching two different database applications: "a primary record viewing system" and "a secondary record viewing system", that share information about a current patient so as to be "patient-record context sensitive". The Applicant believes that Garland can be distinguished from the amended claims in three ways:

First, in Garland, the database applications are not "independently executable" by a single user" on a single computer as required by the amended claims. Instead, the "image viewer" 218 and "record viewer" 220 of Garland can only be executed in a specific order depending on the machine. If the patient record terminal 102 is used, the recorder viewer 220 must be opened first (see [0063] Garland) whereas if the image terminal 104 is used, the image viewer 244 must be open first (see [0078] of Garland). Thus, Garland does not teach a method of rapidly accessing data with independent database applications.

Second, analysis of currently opened database applications does not occur only upon activation of a new database application. That is, Garland does not "analyze software applications currently opened by the user" upon receiving "input from a user... identifying a first software application to be initialized and opened". Instead in Garland, when the user opens either application (the image viewer 210 or the record viewer 220), the database is automatically searched for other relevant images or records regardless of user action. Garland would be difficult to scale to an environment with many applications because in this situation it would invoke many unnecessary database searches.

Third, in Garland, the two different database applications (the image viewer 210 or the record viewer 220) cannot both function in isolation on a single machine by "allowing an identification of the first or second patient through a graphical user interface." In Garland, on the patient record terminal 102, the image viewer is simply an appendage to the record viewer and cannot be used alone to access patient records other than the patient records accessed by the record viewer. The same is true on the image terminal 104 where the record viewer is simply an appendage of the image viewer.

These structural differences reflect fundamental operational differences between Garland and the present invention. The present invention is intended to preserve the user's flexibility in

selecting among many independent applications to run, <u>Garland</u> is really describing a chained

applet fully dependant on another program, like the spell-check applet in a word processor.

These fundamental differences in purpose between <u>Garland</u> and the present invention

mean that a person of ordinary skill in the art reading <u>Garland</u> in light of <u>Sun</u> would not be led to

the present invention's ability to allow freestanding applications to be quickly initialized by

sharing record context information among each other in a flexible way. The <u>Garland</u> approach,

where a request automatically searches all of the image information teaches away from the

present invention because it is impractical for comprehensive sets of patient records. In such

cases, the Garland approach risks overwhelming the limited visual display available in multiple

application workspaces.

Because the deficiencies in <u>Garland</u> are also not remedied by <u>Sun</u>, it is believed that these

claims as amended are distinguishable both over <u>Garland</u> and the combination of <u>Garland</u> and

Sun.

Support for the present limitations are found at a variety of locations in the specification.

For example, the limitation that a set of "independently executable software applications" are

"executable by a single user" on a single computer is found at two paragraphs, paragraph [0025]

which notes:

Where the system user is in a workspace with a number of activity options displayed in
the activity toolbar 36, step 60, the system user performs a task within the activity that is
currently open in the activity display area 38, step 62.

and paragraph [0027] which lists activities available in a workspace:

Upon opening a workspace, for example the patient encounter workspace 108, activities
for which the system user has access for the particular patient appear as activity tabs (not shown)
in the activity toolbar 36. For example, tabs for activities may include graphs 110, chart review
112, results review 114, registration 116, flowsheets 118, patient alerts 120, snap-shot 122, visit
navigator 124, patient history 126, patient demographics 128, order entry 130, or any enterprise
added activity 132 plugged into the HCIS system may appear.

The limitation that the first and second software applications may be opened in any order

is implicit in the statement in paragraph [0025] that the information provider 30 must examine

currently open activities--something that would not be required if there were a predefined

hierarchy of opening applications automatically as provided in <u>Garland</u>.

The limitation that the analysis of currently open records occurs after receipt of the user input is found at paragraph [0025] where it states:

Upon selection or opening of another activity, the activities database 26 is queried to determine what program identifications and necessary data, for example a patient identification, are necessary to open the new activity, step 68. The information provider 30 examines a current activity(ies) in the activity display area 38 and the workspace context for the necessary data, for example a patient identification from an open activity in the workspace, step 70. Where it is determined that a patient identification is present in an open activity in the workspace, the information provider 30 calls services that transfer the necessary information (here, the specific patient information) to the new activity, as shown in step 72, and the new activity is opened, step 78

The limitation that allows identification of a first or second patient by the user when no other applications are open to guide this selection is found, for example, in paragraph [0025] which notes as follows:

However, where the necessary data is not available in the current activity context, the information provider calls a service that prompts the user for the necessary information, for example entry of a patient identification, step 74. This information may be prompted using a dialog window displayed on the graphical user interface 22, for example within the activities display area 38, as would be appreciated by one skilled in the art.

<u>Claims 98 and 109:</u>

The present invention provides a "patient-record context sensitivity" scope that is limited to a particular window and allows the user to direct applications among different windows. While arguably <u>Garland</u> shows a window holding the image viewer and the patient record viewer, there is no indication in <u>Garland</u> that the user has any control how these applications are grouped. Instead, it is clear in <u>Garland</u> that the selection of the windows holding an application is automatic. It is not believed that <u>Sun</u> teaches any sort of "patient-record context sensitivity" and so <u>Sun</u> also fails to teach or suggest this user controlled context scoping.

<u>Claim 120</u>

The Applicant has added a new claim of 120 to provide an alternative formulation of claim 97 that may serve as a basis for the present claim set, if the Examiner believes this formulation would be clearer.

In light of these amendments and remarks, it is respectfully requested that the rejection of claims 97-120 be reconsidered and that these claims be allowed.

Respectfully submitted,

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